U.S. Department of Labor Coffice of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 6 866	2. Fiscal Year Covered From:			
	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	Name, file number, and address of labor organization.			
Name John Murphy	Name New England Regional Council of Carpenters			
	Labor Organization File Number 540 - 823			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 34 Bursley Road	Street 803 Summer Street, 4th Floor			
City Weymouth	City South Boston			
State Massachusetts ZIP Code + 4 02191	State Massachusetts ZIP Code + 4 02127			
5. Position in labor organization. Asst. to Exec. Secretary-Trea	asurer			
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
6. Name and address of Employer (including trade name, if any).	7 a Nature of Interest Transaction or Income			
Name	Not applicable.			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Olas I puning a same	7.b. Amount.			
Street	gamenta and a second a second and a second and a second and a second and a second a			
City	\$0			
State ZIP Code + 4				
Signature				
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)				
Signed Murphy	On Date Telephone Number			

Name of Person Filing John Murphy		File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name Mass.State Carpenters Combined Benefits Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 350 Fordham Road City Wilmington State Massachusetts ZIP Code + 4 01887	9. Business deals with: a. Labor Organizat b. Trust c. Employer	tion			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing		***************************************		
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	John P. Murphy is of the Mass. State Fund				
Street	11.b. Approximate dollar valu	ie of such dealing.	\$0		
City	12.a. Nature of interest held	d or income received.	Spanishers (1997)		
State ZIP Code + 4	Attended conference in Las Vegas, Nevada 10/1/04 - 10/5/04. Total related costs = \$3,808. Attended investment retreat in Chatham, Mass. on 5/24/04 - 5/25/04. Total related costs = \$703. Attended Annual Meeting (with First Trade Union Bank). Cost = \$71.				
	12.b. Amount.	<u></u>	\$4,582		
			<u>Българования при при при при при при при при при при</u>		
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.		*		
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.				
(including trade name, if any).	Not applicable.				
Name	manuel emany initial and an analysis of the second principal analysis of the second principal and an analysis of the second pr		der manufacture de la constante de la constant		
Trade Name, if any:	traceous en		ni mini na manana na		
P.O. Box, Bldg., Room No., if any	водин (акам-орина)		Prophogenia		
Street	водифиранизация		Averences		
City	single decreases and the second secon		adole Constable to		
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		\$0		

Name of Person Filing John Murphy	File Number U -				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name New England Carpenters Training Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 13 Holman Road City Millbury State Massachusetts ZIP Code + 4 01527	9. Business deals with: a. Labor Organization b. Trust c. Employer				
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing. John P. Murphy is a member of the Board of Trustees of New England Carpenters Training Fund. 11.b. Approximate dollar value of such dealing. \$40,721 12.a. Nature of interest held or income received. Attended Christmas luncheon for Board of Trustees of New England Carpenters Training Fund.				
Street City State ZIP Code + 4					
	12.b. Amount.	\$79			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	Not applicable.				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	\$0			

Name of Person Filing John Murphy	File Number U -				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any).	9. Business deals with:				
Name First Trade Union Bank	N a Labor Companies tion				
Trade Name, if any:	a. Labor Organization b. Trust				
P.O. Box, Bldg., Room No., if any	c. Employer				
Street 10 Drydock Avenue	C. Employor				
City Boston					
State Massachusetts ZIP Code + 4 02210		merille station of the state of			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name	John P. Murphy is an employee of Regional Council of Carpenters.				
Trade Name, if any:	funds on deposit at the bank.	en e			
P.O. Box, Bldg., Room No., if any		Monordarium			
Street	11.b. Approximate dollar value of such dealing.	\$3,711,310			
City	12.a. Nature of interest held or income received.	The action of the contract of			
State ZIP Code + 4	Attended Christmas luncheon with of First Trade Union Bank.	Board of Trustees			
	4.2 h Amount	\$69			
	12.b. Amount.	203			
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		•			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	00000000000000000000000000000000000000			
Name	Not applicable.	roullinger			
Trade Name, if any:	O CONTRACTOR CONTRACTO				
P.O. Box, Bldg., Room No., if any	The state of the s				
Street					
City	Vaccini positivi posi				
State ZIP Code + 4	**************************************	эмической			
	14.b. Amount of payment.				
13.b. Is the Business an Employer or Consultant?	1 1.2. 7 should of paymond.	\$0			